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BOROUGH OF HOVE



ANNUAL REPORT

FOR THE YEAR

1954

on the

HEALTH OF THE TOWN

by

N. E. CHADWICK, M.A., M.D., D.P.H.

Medical Officer of Health for Hove.

TOWN HALL ANNEXE, HOVE.

BOROUGH OF HOVE



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HOVE:

The Hove Shirley Press Ltd.,
45-47 Shirley Street—A9741

PUBLIC HEALTH COMMITTEE

HIS WORSHIP THE MAYOR
(Alderman A. H. Dilley).

THE DEPUTY MAYOR
(Councillor A. E. Brocke).

Chairman : Councillor R. B. Barr.

Vice-Chairman : Councillor Mrs. Roberts.

Alderman Miss F. Kenyon-Stow.
Councillor V. P. Appleyard.
Councillor M. de Jersey Creswick.
Councillor P. Earl.
Councillor C. F. Gosling.
Councillor J. L. B. Jayne.
Councillor Mrs. R. M. Stretton.
Councillor E. C. Willeringhouse.

PUBLIC HEALTH STAFF—1954

Medical Officer of Health :

N. E. CHADWICK, M.A., M.D., D.P.H.

Deputy Medical Officer of Health :

N. NEWMAN, M.B., B.Ch., D.P.H. (*to May, 1954*).

J. B. KERSHAW, M.B., B.Ch., D.P.H. (*from October, 1954*).

Senior Sanitary Inspector :

R. J. CHURCHER, C.R.S.I., and Meat Inspection Cert.

Sanitary Inspectors :

L. A. BRITTAIN, Cert S.I.B., and Meat Inspection Cert.

W. F. BODLE, Cert. S.I.B., and Meat Inspection Cert.

F. DRANSFIELD, Cert S.I.B., and Meat Inspection Cert.

Chief Clerk :

H. F. RICKETT.

Public Analyst :

R. F. WRIGHT, B.Sc. (Lond.), A.R.C.S., F.R.I.C.



BOROUGH OF HOVE

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

FOR 1954

TO THE MAYOR, ALDERMEN AND COUNCILLORS
OF THE BOROUGH OF HOVE.

YOUR WORSHIP, LADIES AND GENTLEMEN,

I have the honour to present my annual report for the year 1954 compiled in accordance with the requirements of the Ministry of Health but containing as well comments upon and references to matters primarily of local interest. In these times when so much has been taken away from what have been termed minor authorities and appropriated by Government Departments, Regional Organisations or County Councils, a District Medical Officer may sometimes wonder what his duties and functions really are and whether those in high authority consider his existence still necessary. It is therefore interesting and encouraging to repeat the words of the Sanitary Officers Regulations, 1935, which have never been altered or replaced, which set down in plain terms that "the Medical Officer of Health shall inform himself as far as practical respecting all matters affecting or likely to affect the public health in the district and be prepared to advise the local authority on such matters." It is clear therefore that within a very wide field he must ascertain in facts, put them before his Council and advise them to the best of his ability in the light of his special training and experience. His reports as they appear year by year are a measure of the manner he has interpreted his responsibilities and the matters on which he has informed himself and of the advice he has given to his Authority on them.

Vital Statistics.

It comes very much as a surprise that despite the visual evidence of new houses and flats going up almost overnight it seems on vacant plots in all parts of the town and the accompanying conversions of so many of the older properties, the Registrar General's estimate of the resident population of Hove hardly varies from year to year. Nevertheless his estimate was checked in 1951 by actual counting of heads during the census and showed such a close correspondence that it is quite impossible to doubt the validity and accuracy of his methods. Since 1953 Hove has only added 120 persons to its total population and since 1951 this figure has remained virtually stationary. One of the problems facing the Council and all other bodies interested in the future development and progress of the town is how to attract immigrants who will occupy and bring up families in some of these new houses and flats which at the present time are merely passing from one existing resident to another, so that for every one that is occupied another is made vacant. One of the ways is the encouragement of managements to erect new factories with the provisions of houses for the employees.

The detailed analysis of the 1951 Census Returns for the County of Sussex has now been published as a separate volume by the Stationery Office and it makes some interesting reading for the citizens of Hove. In the 20 years between 1931 and 1951 the population rose from 55,000 to 70,000, a net increase of 26%, arrived at by subtracting a decrease of 13% representing the excess of Deaths over Births, from a 39% increase of immigrants. Whether that 13% can be appreciably reduced will depend upon the success of any efforts made to attract a younger type of immigrant, since with the present age grouping, any improvement in either Birth or Death Rates is not to be looked for.

The Infant Mortality Rate was 10.69, lower even than last year's record—there were no deaths from either Measles or Whooping Cough and only 1 Maternal Death, which could not have been prevented and was not responsive to modern greatly improved methods of treatment. The 8 Infant Deaths included 4 from Congenital Defects, 2 from Pneumonia, 1 from Prematurity and 1 from Accidental Suffocation. 5 survived for a month or less, 3 only lived for under a week.

The deaths among adults shows, as might be expected, a preponderance of those causes associated with advancing or advanced age. Cancer and Heart Disease, affecting both sexes more or less equally. There were, however, others on which the incidence fell very unequally. Cancer of the Lung, 37 deaths per 1,000 for Males and 6 for Females—the controversy as to the role cigarette smoking plays in this sex distribution is not yet determined, but the general male population seems quite content to run the risk which this type of addiction possibly involves. Coronary Disease of the Heart—117 for Males, 74 for Females. Gastric Ulcer—17 for Males, 4 for Females.

Infectious Diseases.

1954 was a very light year in respect of the incidence and severity of all forms of infectious disease. Measles normally has a biennial cycle and as this was the alternate year there were only 13 cases notified as against nearly a 1000 in 1953. Whooping Cough, which is always with us to a greater or lesser degree, showed only 112. The 28 notifications of Dysentery were all of the Sonne type—a mild variety which has been prevalent throughout the country in sporadic cases during and since the war. It is usually mild in older children and adults, but may be dangerous if transmitted to young babies. A comparable disease is Gastro-Enteritis, which if introduced into a Children's Hospital, is most difficult even with the most stringent precautions against cross infection to eradicate. A conference was held of all those interested in this problem to discuss the possibility of establishing a domiciliary nursing service under specialist supervision for the less severe cases and to avoid bringing more into the Children's Wards. Unfortunately however, the administrative and financial problems raised were not capable of immediate solution and further meetings will therefore be necessary. The 6 cases of Poliomyelitis comprised 4 Non-Paralytic and 2 Paralytic, 1 of which died. This was a boy of 8 admitted from a local boarding school, with a history of 2 days illness with indefinite symptoms. His general condition was very poor with marked weakness of all the muscles of the arms, legs and diaphragm, which on the next day degenerated into a definite paralysis involving in addition the muscles of swallowing and respiration. Although placed in an iron lung and given oxygen, he died 12 hours later from toxic damage to the vital centres in the brain. His twin brother was admitted 5 days later with incipient symptoms of the same disease, but these did not progress beyond the stage of some muscular weakness from which he quickly recovered. It is an open question whether he was a contact infection from his brother or a primary infection from the original source whoever that may have been, but in any case there were no more cases in the School. It is pleasing to record not only the complete co-operation of the school authorities in the measures of control and prevention which were advised, but also that the parents with one exception accepted our advice not to remove their children. The other paralytic case was a woman of 56 who only complained of a cold and weakness in the legs on the day preceding admission; later she developed widespread paresis of her arms and legs followed by a complete paralysis from which she made a complete recovery after two months stay in hospital. The other 3 non-paralytic cases were in a boy of 11, a man of 49 and a woman of 21.

There was also admitted a case of Polio-Encephalitis in which the cranial nerves and the higher centres were chiefly affected. After 10 days at home with influenza-like symptoms, a woman of 50 suddenly developed blurred vision and speech, difficulty in swallowing and weakness of the muscles of the face. Later she became drowsy and dis-orientated for about 3 weeks, at the end of which time she commenced to make progress and left hospital after 3 months,

completely recovered except for some inco-ordination of the muscles of walking.

In all these 6 cases the source of the infection was never discovered and except for the 2 brothers there was no spread among contacts family or otherwise, so far as could be ascertained.

The single case of Malaria was a relapse from a primary infection contracted abroad.

Food Poisoning.

6 cases in all were notified—3 single members of separate families and 3 all members of the same family. In all but one the duration and severity was slight, the exception being a woman of 34 from the family group who went into hospital for 5 days. From all patients, specimens submitted to the Public Health Laboratory were negative to food poisoning organisms and in no case was it possible to obtain for examination any suspected food material, although in one instance sausages and in another boiled bacon which had been stored under very unsuitable conditions was very strongly suspected. The essence of success in these food poisoning enquiries is speed and if the notification is only received through the usual channels—by post—the delay almost inevitably means negative results. Frequently of course the patient only calls in his Doctor when either the symptoms are diminishing or fail to respond to his own remedies. While rightly considerable publicity is always being given to the dangers of unhygienic practices in the preparation, distribution and serving of foods in shops, canteens and restaurants, not enough attention is drawn to similar malpractices in the home which occur even when the facilities are adequate. The weekend joint is still too frequently partially cooked on Saturdays, allowed to cool, and then reheated for Sunday dinner—a sequence which is a definite encouragement to any harmful organisms which may be present to sit up and multiply.

Tuberculosis.

Now that the organisation of the Tuberculosis Service is based on the Chest Clinic and the notification register kept there, it is possible for the Medical Officer of Health through lack of intimate knowledge of the patients and their home surroundings to fail to provide some amenity or assistance which is necessary for their welfare. This danger is minimised in Hove by the excellent personal relations with the Chest Physician and by a weekly conference with the Tuberculosis Health Visitor who brings to his notice not only all the new cases which have been placed on the register during the preceding week, but also any special circumstances connected with any of the old ones. The total number of cases does not vary very greatly from year to year with a tendency for an increase in the notifications brought to light by more extensive search for the family contacts and Mass Radiography surveys and a decline in the death rates. Many of these new cases are discovered at a stage when not only are the chances of their recovery very much greater but they are likely to be non-infectious. About 10% of the total number on the register are

sputum positive and therefore a source of danger to others unless they are careful in their mode of life and habits. The Mass Radiography Unit spent its usual 6 months at its headquarters in Brighton and during that time 23,000 passed through its hands. As a result, 68 new cases were discovered, equal to 3 per 1000. Of the total deaths in Hove (13), 4 were between the ages of 15 and 45 and 6 between 45—65, in other words, at the time of life when they should have been making a substantial contribution to the nation, either at work or in the home. That we are steadily eliminating this disease from our midst is quite certain, although the part played by improved nutrition and housing and the effect of modern drugs is still difficult to determine, but this fruitful prospect carries with it its own dangers—already increasing numbers of our adolescents are leaving school and going out into industry or business or the professions without a previous contact with the Tubercle Bacillus. To meet this danger the Ministry of Health has sanctioned the testing of all school leavers and the immunisation of those found to be susceptible.

Housing.

The census volume for Sussex gave more detailed information about housing conditions throughout the County than its predecessor 20 years earlier. The average number of persons per room in Hove was the same at both enumerations, but the percentage of families with more than 2 members per room fell from 1.92 to 0.87. The average size of the household in 1951 was 2.68 persons, and 17% of the total families (24,000) were sharing accommodation, of which 15% had no piped water supply and 14% no cooking stove. In households with undivided occupations, 13% were sharing a piped water supply, 10% a water closet and 14% had no fixed bath. From the table on page 19 it will be seen that during 1954, 136 new Council houses had been completed and a further 50 in the course of construction. The waiting list was reduced from 877 to 520, of whom 177 were rehoused in Council property, the remainder presumably made other arrangements or moved out of the district. The Council decided, on the recommendations of the Housing Committee, not to commit themselves to any further building programme for 1955 with the exception of a small number of old People's flats, until the requirements of the Public Health Committee for rehousing under Slum Clearance Proposals became known. At the same time they approved the policy of rehousing tenants displaced from derequisitioned properties in existing properties bought for the purpose.

It seems probable from my own knowledge and viewing the present waiting list on page 20, which reveals that approximately 50% consist of husband and wife, or husband, wife and 1 child, that the requirements of what may be termed ordinary applicants has been satisfied, but there still remain quite a number with larger families of young children who, either because they have not yet fulfilled the lengthy residential qualification, or because they cannot afford the rent of a recently built Council house will now have to wait still longer for any alleviation of their present unhealthy circumstances.

Housing and Repairs Act, 1954.

This Act came on the Statute Book at the end of August and in Part I included important provisions designed to accelerate the clearance of slum areas, the prevention of overcrowding and the improvement of accommodation in houses let in lodgings. This section of the Act also laid down a standard of fitness for human habitation which was more clearly defined than the previous one in the Housing Act of 1936. Part II allowed the raising of rents in controlled houses provided they were in good repair according to the new definition of fitness and provided also that works of repair had been carried out by the landlord up to a specified amount, according to period of time over which the sum had been expended.

Under the Slum Clearance Section Local Authorities are required to submit within 12 months to the Ministry of Housing and Local Government an estimate of the number of unfit houses in their area and their proposals for dealing with them by way of demolition within the next five years. Under the provisions dealing with the raising of rents a tenant on receiving notice from the Landlord has the right of appealing to the Local Authority for a certificate that either or both of the above mentioned conditions have not been fulfilled and the Local Authority if satisfied that the tenants contention is correct, must issue a certificate which precludes any increase of rent until it is revoked by the landlord carrying out the necessary works. The Public Health Committee was granted delegated powers by the Council to issue and revoke these certificates and in order to prevent undue delay in considering applications, constituted itself into a Sub-Committee on a rota system to meet whenever required. The number of applications received up to December was 17, of which 13 were granted. From these figures and other evidence it does not appear that there is any great rush on the part of landlords to raise rents in accordance with this section of the Act, probably because in a considerable proportion of this property the permitted increase is so small as hardly to warrant the trouble of calculation, quite apart from the necessity in some cases of further works to be carried out if he wishes the certificate of disrepair to be revoked.

Care of the Aged.

The census returns for 1951 showed some interesting and in some respect disturbing comparisons with the old total in 1931. At that time there were 7,500 (2,500 Males to 5,000 Females) persons over the age of 65 out of a total population of 55,000—by 1951 these had risen to 15,000 (5,000 Males to 10,000 Females) out of 70,000, 21%. The problem however is not one entirely of numbers, the ratio of the sexes and the greater longevity of the female comes into the picture and the fact that in Hove a considerable proportion are immigrants—only 37% of the residents of Hove were born even in the County of Sussex—which means that frequently they are without friends or relatives to care for them when the inevitable deterioration sets in. It can be assumed of the total of 15,000, some 400 are bedridden, 1,400 are confined to their own house or rooms and 3,000 limited to

movement within a quarter of a mile of their homes. It is obvious therefore, that the problem of ensuring that the bodily needs of the most helpless, let alone any amelioration of the lot of those more physically able-bodied is insurmountable, and a considerable proportion of my time and that of Miss Linton, the Area Nursing Officer, is taken up with answering appeals for assistance usually in the form of some type of inpatient care from relations, friends, landladies and doctors with results set out on page 13. The demands for accommodation in both welfare homes and hospitals, particularly for the completely bedridden and the frail ambulant, still falls short of the requirements and it is ironic to have to record that often the best way to gain admission to either is for an old person to refuse to leave his home when, if conditions are bad enough, there is always a chance of obtaining a compulsory removal order under the National Assistance Acts, in which event a vacancy is always forthcoming.

Over and above this class is a very much greater number who are anxious and capable of remaining in their own homes, but who lack some of the comforts and little attentions which would alleviate their loneliness and make life generally more bearable. Life in one room, even if you can leave it at times, is never very exciting, particularly if it is at the top of a tall house, all the rooms of which are let off to people with whom you have little in common and who prefer to keep themselves to themselves. Not all old people live in this abandoned state and I am always coming across instances of care and attention given freely and willingly to total strangers without hope of any reward, but it nevertheless remains that a very great number of these old people, particularly the old ladies, have come down to Hove late in life and have no roots here and no relatives or friends sufficiently near to appeal to when they are in need of assistance. Impressed with the extent of this problem and conscious of the need for co-ordinating all the various agencies dealing with old people, the Mayor of Hove set up an old people's Welfare Committee, which when completely organised should do much to improve the lot of these old people both by sorting out their little difficulties, providing them with some of the services they lack, and above all by making it clear that because they are old they are not entirely useless or forgotten. I mentioned in last year's report that the decision of the County Council to Hove's request for delegated powers to register Homes for the disabled and aged persons as well as Nursing Homes, was still pending. This was received during the year and was a refusal on the grounds that it is necessary to maintain a common standard throughout the County and that the County Welfare duties in Hove are not limited to the control of these Homes but included other responsibilities which could not be delegated.

Orders in respect of the Compulsory Removal to Old People's Homes or Hospital under the National Assistance Acts were applied for and granted in respect of 6 old people, 1 married couple, 2 widows and 1 married and 1 single man—2 of these died within a month of their admission but this was in no way accelerated by their removal.

Immunisation and Vaccination.

In January 1954 the Public Health Committee was so concerned with the decline in the number of babies immunised throughout the country as revealed in a circular from the Ministry of Health, that they asked me to present a special report setting out the position in Hove. The circular pointed out that whereas the number of cases had fallen from 23,000 with 930 deaths in 1944 to 240 cases and 24 deaths in 1953, it was necessary to secure year by year that at least 75% of babies should be protected by the end of their first year of life, and that in point of fact only about 30% were immunised in 1953. Hove's percentage was rather better than the country's average, 44% in 1953, but it had fallen from 55% in 1951. Whilst it is true that for many years Hove has been free from both cases and deaths—the last were in 1942 when there were 10 cases with 2 deaths—such procedure may not continue indefinitely with a decreasing rate of immunisation year by year. In one outbreak in 1952 in another part of the country, there were 78 cases with 6 deaths. I am glad to report that partly, at any rate, due to the publicity which this report received, the percentage of eligible children immunised in 1954⁴ rose to approximately 70%.

Vaccination.

The same general remarks apply to Infant Vaccination as to Diphtheria Immunisation, the percentage of infants vaccinated is too low to guarantee that if smallpox is introduced into a community it will not spread because of its high proportion of unprotected individuals. Along with diphtheria immunisation I am glad to report a rise in the percentage of infant vaccinations which for 1954 was about 60%.

Miscellaneous.

Smoke and Grit Nuisance.

Complaints were received at different times during the year of the emission of smoke from laundry premises and deposit of grit from installations in and around Shoreham Harbour, the latter providing by far the greater number. A conference of Hove, Portslade, Southwick Council representatives and officials was held in February to discuss the possibility of reviving and extending a joint scheme for the installation of instruments to measure these deposits and trace their source. The Committee decided to await the preparation of a future joint scheme for the three Local Authorities. In the meanwhile the report of the Beaver Committee on Air Pollution has been published and a Clean Air Bill to implement many of its recommendations started its progress through Parliament. Unfortunately, so long as the offending parties are able to advance the defence that they have taken the best possible measures to obviate the nuisance, it is virtually impossible for any action at law in the form of an injunction to succeed.

Noise.

The Public Health Committee had before them at their meeting in November an invitation by a County Borough to support the promotion of legislation to deal with nuisance or damage to health caused by noise. The Committee, while sympathetic to this proposition, had not received many complaints and were impressed with the difficulty of framing an adequate legal definition. Whilst it is readily accepted that noise is deleterious to health both to those working amongst it and those exposed to it in their own homes or outside in the street, there is very little scientific evidence or controlled experiments to support it. It can however be counter-argued that nevertheless as it is annoying it should be remedied, which is in fact what happens—we get used to it and learn to disregard it.

Fly Infestation on the Beaches.

In the Autumn of 1953 a considerable section of the beaches on the South Coast were infested with the seaweed fly and grave fears were entertained that there would be a recrudescence of this trouble in the late Spring or Summer of 1954. Fortunately, either because of the effectiveness of the spraying of our beaches with a D.D.T. Solution at the time of the original infestation—a method which received official commendation when the scientific report of the Ministry of Agriculture and Fisheries was received—or more probably because the necessary concomitant favourable conditions for the survival and development of the fly were not all present in 1954, the nuisance did not recur.

General Administration.

No alterations were made in the internal organisation of the Public Health Department which continues to carry out duties on behalf of the County Council as well as the Borough. Dr. Newman, the Deputy Medical Officer of Health, left in May, and the arrival of his successor, Dr. Kershaw, was delayed until the following October because of the terms of the appointment and also to the dearth of suitable candidates. I conclude this report as always, in recording my indebtedness to my medical colleagues and the sanitary and clerical staff who year by year ensure in their several spheres the smooth and efficient working of the Department and at the same time relieve me of a mass of detail which otherwise would divert me from more important tasks.

Finally I would refer to my gratitude to the members of the Public Health Committee for their continued confidence and support throughout the year.

I have the honour to be,

Your obedient servant,

N. E. CHADWICK,

Medical Officer of Health.

STATISTICS, 1954.

Area	..	..	..	(Acres) 4,010 $\frac{3}{4}$
Resident Population (Mid-1954)	..	..	..	69,490
Population, 1951 (Census)	..	..	..	69,435
Rateable Value (31st March, 1954)	..	..	..	£1,183,268
Sum represented by a penny rate	..	..	..	£4,778

Births.				M.	F.
Legitimate	..	..	688	348	340
Illegitimate	..	..	60	30	30
Birth rate : 10.76 (standard).					
Birth rate : 12.70 (corrected).					

Deaths	..	..	..	1172	547	625
Death rate : 16.87 (standard).						
Death rate : 9.78 (corrected).						
Deaths from Cancer	..	..	..	..	..	217
Deaths from Measles	..	..	..	..	..	<i>Nil</i>
Deaths from Whooping Cough	..	..	..	..	..	<i>Nil</i>

Deaths of Infants under One Year of Age.				M.	F.
Legitimate	..	..	7	3	4
Illegitimate	..	..	1	—	1

Rate per 1,000 Live Births : 10.69.

Legitimate	..	..	10.17
Illegitimate	..	..	16.6
Neo-Natal Mortality per 1,000 births :			5.35

Still Births : 18.

Rate per 1,000 Population	..	0.26
Rate per 1,000 Births	..	24.06
Maternal Mortality Rate per 1,000 births :		1.33

Infant Deaths : 8.

Under one month	..	4, <i>i.e.</i> , 50%
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REGISTRATION OF NURSING HOMES.

	Number of Homes	Number of Beds provided for :		
		Maternity	Others	Totals
Homes first registered during year	—	—	—	—
Houses on the Registered List at end of year	32	11	387	398

OLD PEOPLE, 1954.

Total number of new patients visited during the year	..	260
Total number of revisits	.. ..	318
Brighton General Hospital and related Hospitals	.. .. 48	(3 on a 3-day Order).
Brighton General Hospital Mental Observation beds	.. 7	
Other Hospitals	.. .. 7	
Nursing Homes	.. .. 15	
St. Francis Hospital	.. 3	
County Welfare Homes	.. 27	
Private Old People's Homes	.. 10	
Observation at home or pending admission to County Welfare or other homes	.. .. 143	
	260	

Of the above : 7 died at home.
 16 died in hospital.
 5 died in nursing homes.
 1 died in County Welfare Home.

TUBERCULOSIS.

TUBERCULOSIS.

	New Cases. *						Deaths.				Other Removals				Cases on Register.				Totals
	Pul.			Non-Pul.			Pul.		Non-Pul.		Pul.		Non-Pul.		Pul.		Non-Pul.		
	M.	F.		M.	F.		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Under 1	..	1													1				1
1— 5	..	1									2				3	1	1	1	6
5—10	..	2	3		1										6	10	3	3	22
10—15	..	2	1	1								1			4	4	6	6	20
15—20	..	2	1				2				1	1	1		11	8	3	4	26
20—25	..	6	11								3	4			23	28	3	2	56
25—35	..	13	18	1	2			1			6	14	1		63	48	6	6	123
35—45	..	19	9				1		1		6	10			85	49	4	5	143
45—65	..	18	6		1		5	1			5	8			92	40	2	9	143
Over 65	..	4	1				1	2			1	1			31	12	2	6	51
Totals	..	68	50	2	4		9	4	—	1	24	39	2	1	319	200	30	42	591

* These figures include "Inward Transfers."

PREVALENCE AND CONTROL OVER INFECTIOUS DISEASES, 1954.

NOTIFIABLE DISEASES DURING THE YEAR.

INFECTIOUS DISEASE.

Disease		Total Cases Notified
Scarlet Fever ..	..	57
Whooping Cough	..	112
Polio-Myelitis ..	..	6
Measles ..	..	13
Pneumonia ..	..	24
Dysentery ..	..	28
Acute Encephalitis	..	1
Paratyphoid Fever	..	1
Erysipelas ..	..	12
Food Poisoning	..	6
Puerperal Pyrexia	..	2
Malaria ..	..	1

VENEREAL DISEASES.

STATEMENT OF CASES ADMITTED TO THE BRIGHTON V.D. CLINIC FROM THE HOVE AREA DURING 1953.

TOTAL	M.	F.	SYPHILIS		GONORRHOEA		OTHER CONDITIONS	
			M.	F.	M.	F.	M.	F.
111	88	23	9	1	15	3	64	19

*1 Male is a double infection, i.e. suffering from Syphilis and Gonorrhoea.

Less Cases transferred from other Centres to Hove area.

6	6	—	3	—	1	—	2	—
---	---	---	---	---	---	---	---	---

New Infections from Hove area

105	82	23	6	1	14	3	62	19
-----	----	----	---	---	----	---	----	----

Syphilis Cases Diagnosed as follows.

	M.	F.
Primary	—	—
Secondary	—	—
Early Latent	—	—
Cardio Vascular	—	—
Neurosyphilis	5	1
Late Latent and Tertiary	1	—
Congenital under 1 year	—	—
Congenital over 1 year	—	—
	6	1

Other Conditions diagnosed as follows.

	M.	F.
Non-Specific Urethritis	26	—
Requiring Treatment	23	12
Not requiring Treatment	13	7
	62	19

DIPHTHERIA IMMUNISATION

1954.

DIPHTHERIA IMMUNISATION.

	AGE at date of final injection (as regards A) or of reinforcing injection (as regards B).							
	Under 1	1	2	3	4	5 to 9	10 to 14	Total
A. Number of children who completed a full course of primary immunisation in the Authority's Area (including temporary residents) during the year . .	281	307	38	22	11	87	21	767
B. Number of children who received a secondary (reinforcing) injection (<i>i.e.</i> , subsequently to primary immunisation at any earlier age) during the year . .	—	—	3	32	29	279	36	370

There were no cases of Diphtheria notified during the year.

VACCINATION.

VACCINATION.
NUMBER OF PERSONS VACCINATED OR RE-VACCINATED DURING 1954.

Age at Date of Vaccination	Under 1	1	2 to 4	5 to 14	15 or over	Total
Number Vaccinated ..	467	28	7	10	17	529
Number Re-Vaccinated ..	—	—	22	53	280	355

**(a) HOUSING PROGRESS REPORT FOR YEAR ENDED
31st DECEMBER, 1954.**

Council Houses.

Total at Quarter ended

		31/12/53	31/3/54	30/6/54	30/9/54	31/12/54
(a)	To be built under Contracts signed by the Council ..	956	956	956	956	956
(b)	Total number completed ..	770	790	832	866	906
(c)	Total number in course of construc- tion	186	166	124	90	50
(d)	To be built by direct labour by Housing Depart- ment ..	240	240	240	240	240
(e)	Total number completed ..	240	240	240	240	240
(f)	Total number in course of construc- tion	—	—	—	—	—

Requisitioned Property.

(g)	Total number of houses upon which requisition has been confirmed ..	105	102	95	93	93
(h)	Number of family units contained in these properties ..	445	434	406	398	398

(b) **THE TOTAL NUMBER OF FAMILY UNITS OF
ACCOMMODATION IN ALL PROPERTIES AT
31st DECEMBER, 1954.**

Council Houses and Flats	..	1992
Requisitioned Property	..	398
Old People's Flats	.. ..	44
Manor House, Court Farm, New Cottages and Purchased Property	.. ..	20
		<hr/>
		2454
		<hr/>

(c) **THE TOTAL NUMBER OF FAMILY UNITS REHOUSED
IN ALL PROPERTIES FROM 1st JANUARY, 1954
TO 31st DECEMBER, 1954.**

177

(d) **THE PRESENT POSITION (31-12-54) AS TO OUT-
STANDING APPLICATIONS FOR ACCOMMODATION
IS AS FOLLOWS.**

One or more Adults	..	67
Man and wife only	.. ..	93
Man, wife and 1 child	..	173
Man, wife and 2 children	..	103
Man, wife and 3 children	..	44
Man, wife and 4 or more children		19
Aged persons	.. ..	21
		<hr/>
	TOTAL	520
		<hr/>

SANITARY CIRCUMSTANCES OF THE AREA.

SANITARY INSPECTION OF THE DISTRICT.

ANNUAL STATEMENT OF THE SENIOR SANITARY INSPECTOR FOR THE YEAR 1954.

TOTAL number of Houses inspected (under Public Health or Housing Acts)	..	..	..	929
TOTAL number of Revisits	..	..	..	1723
TOTAL number of Inspections made for the purpose	..	..	..	1010
Number of Houses inspected found satisfactory	..	..	..	423
Number of Houses inspected found with defects	..	..	..	506
Number of Informal Notices served	..	..	..	506
Number of Statutory Notices served	..	..	..	44
Number of Premises inspected (other than houses) from complaints of nuisances, etc.	..	..	..	55
Number of Inspections made for the purpose	..	..	..	58
Number of Revisits	..	..	..	42
Number of Premises inspected in which nuisances were found	..	..	..	11
Number of Informal Notices served	..	..	..	9
Number of Statutory Notices served	..	..	..	<i>Nil</i>

Dairies and Milkshops.

Number of inspections of Dairies	..	..	..	88
Number of inspections of Milkshops	..	..	..	39

Food Retailers Premises.

Number of Shops inspected in respect of Meat	..	..	..	463
Ice Cream	..	..	..	76
Fish	..	..	..	139
Grocery, Provisions, etc.	..	..	..	152
Cafes, Restaurants, Kitchens, etc.	..	..	..	188
Other Shops	..	..	..	30
Bakehouses	..	..	..	102

Shops Act, 1934.

Number of Shops inspected	..	..	..	165
Number of Notices served.	Informal	..	..	11
	Statutory	..	..	<i>Nil</i>

Hawkers' Barrows.

Number of Hawkets' Barrows inspected	27
--------------------------------------	----	----	----	----

Stables.

Number of Stables inspected	..	..	..	13
Number of Notices served.	Informal	..	..	<i>Nil</i>
	Statutory	..	..	<i>Nil</i>

Vermin (Bugs).

Number of visits regarding verminous premises	..	52
Number of visits for disinfection of rooms	..	31
Number of rooms treated for vermin	..	48

Drains.

Number of drains completely renewed	..	3
Number of drains partly repaired	..	15
Number of visits during reconstruction or repair	..	188

Illness.

Number of visits in respect of illness.	Infectious	..	69
	Non-Infectious	..	24
Number of visits in respect of Tuberculosis	..	..	100

Miscellaneous.

Number of Sundry visits	..	..	476
Number of visits respecting Unsound Food	..	..	177

Table of Defects.

Number of soil and vent pipes, W.C's, sinks and waste pipes	98
Number of gutters and rain water pipes	41
Number of rooms, passages and staircases requiring cleansing	5
Number of structural defects to walls, floors, ceilings, doors, windows, grates, stairs and handrails	241
Number of roofs, chimneys, yard paving, steps and areas	114
Number of dustbins, ashpits	164
Number of cases of dampness	132
Number of accumulations of manure, refuse, etc.	10
Number of animal nuisances	3
Number of insufficient sanitary accommodation	Nil
Number of defective water supply	7
Number of choked drains	65
Number of bakehouses limewashed	5

HOUSING STATISTICS FOR THE YEAR 1954.

Number of new houses erected during the year :—

(a) By Private Enterprise	..	..	154
One Block of Flats which provides accommodation for 21 families	..	..	21
Additional Dwelling by conversion into Flats	..	..	109
(b) With State assistance under Housing Acts :			
By Local Authority.	Houses	..	14
	Flats	..	102

HOUSING REPAIRS AND RENTS ACT, 1954.

Number of Applications for a Certificate of Disrepair	..	17
Number of Certificates of Disrepair granted	..	13

FACTORIES ACT, 1937.

INSPECTIONS for purposes of provisions as to health (including inspections made by Sanitary Inspectors).

Premises.	M/c Line No.	Number on Register	Number of		
			Inspections	Written notices.	Occupiers prosecuted.
(i) Factories in which Sections 1, 2, 3, 4 and 6 are enforced by Local Authorities ..	1	228	196	7	<i>Nil</i>
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	2	60	59	8	<i>Nil</i>
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises) ..	3	4	5	<i>Nil</i>	<i>Nil</i>
TOTAL		292	260	15	<i>Nil</i>

CASES IN WHICH DEFECTS WERE FOUND.

Particulars	M/c Line No.	Number of cases in which defects were found.				No. of cases in which prosecutions were instituted.
		Found	Remedied	To H.M. Inspector	Referred By H.M. Inspector	
Want of cleanliness (S.1) ..	4	9	9	—	—	—
Overcrowding (S. 2) ..	5	—	—	—	—	—
Unreasonable temperature (S. 3)	6	—	—	—	—	—
Inadequate ventilation (S. 4) ..	7	1	1	—	—	—
Ineffective drainage of floors (S. 6)	8	1	1	—	—	—
Sanitary Conveniences (S. 7) (a) insufficient ..	9	2	2	—	—	—
(b) unsuitable or defective	10	9	9	—	2	—
(c) not separate for sexes ..	11	1	1	—	1	—
Other offences against the Act (not including offences relating to Outworkers)	12	—	—	—	—	—
TOTAL		23	23	—	3	—

OUTWORKERS.

Sections 110 and 111.

Nature of Work	M/c Line No.	Section 110			Section 111		
		No. of outworkers in August list required by Sect. 110 (1) (c).	No. of cases of default in sending lists to the Council.	No. of prosecutions for failure to supply lists.	No. of instances of work in unwhole- some premises.	Notices Served.	Prosecutions
Wearing Apparel, Making, Altering, etc.	13	60	<i>Nil</i>	<i>Nil</i>	<i>Nil</i>	<i>Nil</i>	<i>Nil</i>
Furniture and Upholstery	18	1	<i>Nil</i>	<i>Nil</i>	<i>Nil</i>	<i>Nil</i>	<i>Nil</i>
TOTAL		61	<i>Nil</i>	<i>Nil</i>	<i>Nil</i>	<i>Nil</i>	<i>Nil</i>

FOOD PREMISES.

Registered under Section 14 of the Food and Drugs Act. Ice Cream.

For the manufacture of Ice Cream	3
For the sale of Ice Cream ..	151
Premises registered for Cooked and Preserved Meat ..	29
Premises registered for the Manu- facture of Sausages ..	36

Dairies Registered under the Milk and Dairies Regulations, 1949.

Number of Registered Dairies ..	4
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NUMBER OF FOOD PREMISES.

Grocers and Provision Merchants	115
Butchers and Cooked Meats ..	41
Fish Shops (including fried fish) ..	22
Fruiterers	70
Bakers (retail)	33
Confectioners	86
Restaurants and Cafes ..	45
Bakehouses	15

UNDERGROUND BAKEHOUSES.

During the year one underground bakehouse was closed by the Council and two others have been discontinued so that now there remains six underground bakehouses in the Borough.

FOOD AND DRUGS ACT, 1938.

Pork Sausages	31
Beef Sausages	3
Milk	24
Butter	6
Ice Cream	6
Pepper	2
Whisky	1
	—
Total ..	73
	—

Deficient Samples.

No. 102	Pork Sausages—Deficient in Meat	10.7%
No. 103	Pork Sausages—Deficient in Meat	20.7%
No. 107	Pork Sausages—Deficient in Meat	10.0%
No. 109	Pork Sausages—Deficient in Meat	4.6%
No. 210	Pork Sausages—Deficient in Meat	8.4%
No.	Whisky—Added Water	6.0%

Food and Drug Act Prosecutions.

Cases were taken against the licensee and the person selling the Whisky. Both defendants were fined £10 each and ordered to share the costs of £7 14s. 0d.

Public Health Act—Prosecutions.

Proceedings were taken against a property owner for the abatement of a nuisance. The Court made an order for the work to be done in 28 days.

An appeal was made by an owner against the provision of a dustbin. The Court dismissed the appeal.

An appeal was made by the owners of a house against the provision of dustbins for three flats. The Court dismissed the appeal of the owners in the case of one flat and in the other two cases allowed the appeal.

Costs were granted to the Council in one instance and against the Council in the other two cases.

Examination of Ice Cream.

Number of samples taken	..	..	..	48
Graded as follows :				
Grade 1	..	..	..	33
Grade 2	..	..	..	11
Grade 3	..	..	..	4

RATS.

During the year, the Rodent Operators made 2502 visits and number of rat bodies found was 270.

Two full time rodent operators are employed.

SEWER TREATMENT.

One complete and one partial treatment of sewers was carried out during the year. The number of rats destroyed is problematical, but the treatment is essential to keep the rats in the sewers down to the minimum.

SALE OF MILK UNDER SPECIAL DESIGNATIONS.

Licences were granted as follows :—

For the Sale of Tuberculin Tested Milk	..	..	32
For the sale of Pasteurised Milk	..	..	50
For the sale of Sterilised Milk	..	..	31
Supplementary Licence for the sale of Sterilised Milk	..		1
Licence to Pasteurise Milk	..	..	1

SAMPLES OF DESIGNATED MILK TAKEN DURING THE YEAR.

Tuberculin Tested Milk (Farm Bottled)	89
Tuberculin Tested Pasteurised Milk	61
Pasteurised Milk	224
Sterilised Milk	33

Samples which did not comply with the Conditions.

Tuberculin Tested Milk ..	6
Tuberculin Tested Pasteurised Milk	3
Pasteurised Milk	1

The three samples of Tuberculin Tested Pasteurised Milk failed as follows : one on the Methylene Blue test, one on the Phosphatase test and one on both the Methylene Blue and Phosphatase tests. The one sample of Pasteurised Milk failed on the Phosphatase test.

BIOLOGICAL EXAMINATION OF MILK.

Tuberculin Tested Milk ..	35
Non-designated Milk ..	63

Three samples of non-designated milk were found to contain Tubercle by Guinea Pig inoculation.

BACTERIOLOGICAL EXAMINATION OF THE SWIMMING BATH WATER AT THE KING ALFRED.

Small Bath.

Date	Plate Count Yeastrel Agar 2 days 37°C. Aerobically	Probable number of Coliform MacConkeys 2 days 37°C.	
12th Jan.	Less than 1 per ml.	Less than 1 per 100 ml.	
4th Feb.	Less than 1 per ml.	Less than 1 per 100 ml.	
15th Feb.	107 per ml.	Less than 1 per 100 ml.	
24th Feb.	Less than 1 per ml.	Less than 1 per 100 ml.	
2nd March	2 per ml.	Less than 1 per 100 ml.	
23rd March	Less than 1 per ml.	Less than 1 per 100 ml.	
6th April	22 per ml.	Less than 1 per 100 ml.	
19th May	2 per ml.	Less than 1 per 100 ml.	
2nd June	48 per ml.	Less than 1 per 100 ml.	
14th June	6 per ml.	Less than 1 per 100 ml.	
5th July	1 per ml.	Less than 1 per 100 ml.	
12th July	25 per ml.	Less than 1 per 100 ml.	
27th July	3 per ml.	1 per 100 ml.	1 Faecal
3rd Aug.	1 per ml.	Less than 1 per 100 ml.	
16th Aug.	5 per ml.	3 per 100 ml.	3 Faecal
26th Aug.	45 per ml.	8 per 100 ml.	1 Faecal
1st Sept.	14 per ml.	1 per 100 ml.	Non- faecal
16th Sept.	64 per ml.	5 per 100 ml.	5 Faecal
12th Oct.	900 per ml.	25 per 100 ml.	25 Faecal
26th Oct.	2,500 per ml.	3 per 100 ml.	1 Faecal
2nd Nov.	220 per ml.	35 per 100 ml.	1 Faecal
10th Nov.	162 per ml.	Less than 1 per 100 ml.	
29th Dec.	117 per ml.	Less than 1 per 100 ml.	

BACTERIOLOGICAL EXAMINATION OF THE SWIMMING WATER BATH AT THE KING ALFRED.

Large Swimming Bath.

Date	Plate Count Yeastrel Agar 2 days at 37°C. Aerobically	Probable Number of Coliform Bacilli, MacConkeys 2 days at 37°C.	
27th April	69 per ml.	Less than 1 per 100 ml.	
4th May	73 per ml.	13 per 100 ml.	3 Faecal
19th May	3 per ml.	25 per 100 ml.	Non- faecal
2nd June	315 per ml.	Less than 1 per 100 ml.	
14th June	24 per ml.	Less than 1 per 100 ml.	
5th July	4 per ml.	Less than 1 per 100 ml.	
12th July	6 per ml.	Less than 1 per 100 ml.	
27th July	Less than 1 per ml.	Less than 1 per 100 ml.	
3rd Aug.	3 per ml.	1 per 100 ml.	Non- faecal
16th Aug.	18 per ml.	Less than 1 per 100 ml.	
26th Aug.	28 per ml.	1 per 100 ml.	Non- faecal
1st Sept.	4 per ml.	Less than 1 per 100 ml.	
16th Sept.	4 per ml.	1 per 100 ml.	1 Faecal

The large swimming bath is used as such for the period from Easter until the end of September.

FOOD CONDEMNED DURING THE YEAR 1954.

Home Killed Meat.

Beef	538 lbs.
Pork	68 ozs.
Mutton	135 lbs.
Ox Tongue	8 lbs.

Imported Meat.

Beef	56 lbs.
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Miscellaneous Meat Products.

Ham	83 lbs.
Bacon	8 lbs.
Pork Sausages	43 lbs.
Beef Sausages	12 lbs.

Tinned Meat.

Ham	..	..	..	206 lbs.
Luncheon Meat	..	..	..	175 lbs.
Corned Beef	..	..	..	302 lbs.
Stewed Steak	..	..	..	171 lbs.
Mutton	..	..	..	4 lbs.
Jellied Veal	..	..	..	104 lbs.
Ham and Tongue	..	..	..	8 lbs.
Pork Kidneys	..	..	..	5 lbs.
Ox Tongues	..	..	..	24 lbs.
Brisket of Beef	..	..	..	7 lbs.
Sausages	..	..	..	4 lbs.
Steak Puddings	..	..	..	5 lbs.

Wet Fish.

Halibut	..	..	..	8½ stones
Whiting	..	..	..	8 stones
Cod ..	..	..	..	8 stones
Lemon Soles	..	..	..	5 stones
Dog Fish	..	..	..	4 stones
Herrings	..	..	..	2 stones
Dabs	..	..	..	1 stone
Hake	..	..	..	1 stone
Golden Cutlets	..	..	..	1 stone
Turbot	..	..	..	1 stone
Smoked Haddock	..	..	..	1½ stones
Kippers	..	..	..	12 stones
Salmon	..	..	..	9 lbs.
Cods Roe	..	..	..	1½ stones
Herrings Roe	..	..	..	1 stone
Escallops	..	..	..	8 dozen
Cockles	..	..	..	1 gallon

Tinned Fish.

Pilchards	..	..	..	100 tins
Salmon	..	..	..	45 tins
Sardines	..	..	..	35 tins
Herrings	..	..	..	35 tins
Silds ..	..	..	..	10 tins
Herring Roes	..	..	..	10 tins
Rock Lobster	..	..	..	2 tins
Craw Fish	..	..	..	2 tins
Crab ..	..	..	..	3 tins
Anchovy	..	..	..	1 tin

Tinned Fruit.

Plums	..	..	..	1703 lbs.
Peaches	..	..	..	138 lbs.
Pineapple	..	..	..	136 lbs.
Pears	..	..	..	134 lbs.
Blackcurrants	..	..	..	155 lbs.
Grapefruit	..	..	..	114 lbs.
Apricots	..	..	..	109 lbs.
Blackberries	..	..	..	106 lbs.
Strawberries	..	..	..	48 lbs.
Cherries	..	..	..	21 lbs.
Rhubarb	..	..	..	55 lbs.
Apples	..	..	..	19 lbs.
Oranges	..	..	..	17 lbs.
Apple and Cranberries	..	..	..	16 lbs.
Fruit Salad	..	..	..	15 lbs.
Damsons	..	..	..	11 lbs.
Gooseberries	..	..	..	8 lbs.
Grapes	..	..	..	9 lbs.
Raspberries	..	..	..	5 lbs.
Greengages	..	..	..	1 lb.
Loganberries	..	..	..	1 lb.
Quince	..	..	..	1 lb.
Olives	..	..	..	2 tins
Fruit Pulp :				
Apricot	..	..	..	130 lbs.
Apple	..	..	..	17 lbs.

Tinned Vegetables.

Processed Peas	..	..	..	270 lbs.
Beans in Tomato Sauce	..	..	..	166 lbs.
Garden Peas	..	..	..	120 lbs.
Tomatoes	..	..	..	96 lbs.
Carrots	..	..	..	76 lbs.
Mixed Vegetables	..	..	..	10 lbs.
Beetroot	..	..	..	6 lbs.
Runner Beans	..	..	..	4 lbs.
Asparagus	..	..	..	2 lbs.

Tinned Milk.

Evaporated Milk	..	..	489 tins
Skimmed Milk	..	..	52 tins
Full Cream Milk	..	..	45 tins
Cream	..	..	36 tins

Jam and Marmalade.

Apricot	..	..	100 lbs.
Raspberry	..	..	32 lbs.
Blackcurrant	..	..	19 lbs.
Strawberry	..	..	10 lbs.
Plum	..	..	8 lbs.
Gooseberry	..	..	3 lbs.
Fig	..	..	4 lbs.
Orange Marmalade	..	..	65 lbs.
Grapefruit Marmalade	..	..	10 lbs.

Soup.

Tomato	..	..	43 tins
Vegetable	..	..	24 tins
Mushroom	..	..	7 tins
Chicken	..	..	5 tins
Oxtail	..	..	4 tins
Spinach	..	..	1 tin
Celery	..	..	1 tin
Meat	..	..	1 tin

Other Foods.

Cheese and Tomato Spread	..	..	32 jars
Cheese Spread	..	..	14 lbs.
Meat Paste	..	..	24 jars
Whole Liquid Egg	..	..	561 lbs.
Cheese	..	..	74 lbs.
Beans and Sausages	..	..	4 tins
Cottage Pie	..	..	4 lbs.
Skinned Rabbits	..	..	30 lbs.
Fish Paste	..	..	23 jars
Pickles and Sauces	..	..	12 bottles and jars
Mayonaise	..	..	14 jars
Christmas Puddings	..	..	4 lbs.
Apple Juice	..	..	1 tin
Tomato Juice	..	..	7 tins
Grapefruit Juice	..	..	1 tin
Orange Juice	..	..	4 tins
Lime Juice	..	..	1 bottle
Orange Squash	..	..	1 bottle
Pineapple Juice	..	..	10 tins
Spaghetti	..	..	68 lbs.
Baby Foods	..	..	11 tins

Cereals	..	..	..	12 pkts.
Gherkins	..	..	..	2 galls.
Mincemeat	..	..	..	1 jar
Flour	..	..	..	3 lbs.
Jelly Crystals	..	..	..	3 ozs.
Creamed Rice	..	..	..	1 lb.
Pork Pies	..	..	..	16
Dried Peaches	..	..	..	15 lbs.
Dates	..	..	..	9 lbs.
Butter	..	..	..	1½ lbs.
Fish Cakes	..	..	..	94
Honey	..	..	..	2 lbs.
Golden Syrup	..	..	..	9 lbs.

Although the quantities of unsound tinned food appear to be large, only a small percentage of this is obtained from the retail shops owing to the practice of the wholesalers separating unfit tins and then calling for condemnation. If this was not done, it would involve visits to the shops with the additional duty resulting in the same object.

All unsound food is destroyed at the Refuse Destructor.